

Application Data Sheet

Application Information

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD FOR THE DISSOCIATION OF THE EXTRACELLULAR HAEMOGLOBIN MOLECULE OF <I> ARENICOLA MARINA </I> AND THE CHARACTERISATION OF THE PROTEIN CHAINS FORMING THE MOLECULE AND THE NUCLEOTIDE SEQUENCES CODING FOR SAID PROTEIN CHAINS
Attorney Docket Number::	0508-1158
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	10
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	

Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FRANCK
Middle Name::
Family Name:: ZAL
Name Suffix::
City of Residence:: MORLAIX-PLOUJEAN
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing SAINT KIRIO
Address::
City of Mailing Address:: MORLAIX-PLOUJEAN
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-29600

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: CHRISTINE
Middle Name::
Family Name:: CHABASSE
Name Suffix::
City of Residence:: NANDY
State or Province of
Residence::
Country of Residence:: FRANCE

Street of Mailing 75, PROMENADE DU ROUGE-GORGE
Address::
City of Mailing Address:: NANDY
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-77176

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MORGANE
Middle Name::
Family Name:: ROUSSELOT
Name Suffix::
City of Residence:: MOELAN S/MER
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing BRIGNEAU
Address::
City of Mailing Address:: MOELAN S/MER
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-29350

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: XAVIER
Middle Name::
Family Name:: BAILLY
Name Suffix::
City of Residence:: CAUGE
State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 3, ALLEE DES NOISETIERS

Address::

City of Mailing Address:: CAUGE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-27180

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002602	10/13/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0311992	10/14/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::